



Minta Palmer has completed this personal reflection on **12/11/2021**

Paper: Autumn 2021 CPD Questions

Personal Reflection:

Description of the Learning: SVT Newsletter Questions - Autumn 2021 Edition

1. Early experience with arterial thromboembolic complications in patients with COVID-19

Analysis: Retrospective review of all patients admitted from 1 March 2020 ,Äì 20 April 2020 who underwent carotid, upper, lower, and aortoiliac arterial duplex, CTA or MRA to exclude arterial thrombosis in an attempt to identify and characterise potential risk factors for thromboembolic disease.

Conclusion: Covid positive patients with arterial thromboemboli generally had a higher D-dimer, greater BMI, and elevated white blood cell count. Arterial thromboemboli tended to affect larger vessels, and patients generally had no underlying arterial disease to the affected area. The authors speculate that a hyperinflammatory state is created with Covid 19, which makes the patient hypercoagulable.

Benefits to your practice: No benefit to my current practice.

Benefits to service user: Awareness of these findings can help to prevent thromboembolism in Covid patients who present with risk factors that may make them vulnerable to clot formation.

2. Pulmonary Embolism and Deep Vein Thrombosis in COVID-19: A Systematic Review and Meta-Analysis

Analysis: Literature search evaluating incidence of PE and DVT in Covid 19 patients, with Random-Effect model and metaregression analysis to evaluate if the current diagnostic protocols for D-dimer are accurate in predicting PE in Covid positive patients.

Conclusion: Although D-dimer levels are generally elevated in Covid positive patients, this study suggested that the current cut-off for D-dimer levels are still accurate in assessing the risk of PE.

Benefits to your practice: No benefit to my current practice.

Benefits to service user: This study shows that DVT and PE are very common in Covid positive patients, and proper diagnosis and treatment will help to improve their recovery time. Confirming that the current D-dimer protocols are accurate in Covid patients will allow clinicians to better assess the patient's risk of DVT/PE.